

## NOTICE OF INTENT

### KENTUCKY PRIVATE ACTIVITY BOND ALLOCATION COMMITTEE

Mail to:  
KENTUCKY PRIVATE ACTIVITY BOND ALLOCATION COMMITTEE  
702 Capitol Avenue, Suite 76  
Frankfort, KY 40601

**GENERAL:** The issuer must file two (2) signed copies along with one (1) copy each of supporting documents. Read 200 KAR 15:010, KRS 103.286-103.287 carefully. A Notice of Intent will not be considered a qualified application and will not be dated as accepted unless all required information is provided.

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- 1. ISSUER:** Provide the legal name, address, telephone and fax numbers and e-mail address of the issuing authority as well as the contact person at the issuing authority.

ISSUER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

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- 2. BORROWER/USER NAME:** Provide the name, address, telephone and fax numbers and e-mail address of the borrower or principal user as well as the contact person at the borrower/user.

BORROWER/USER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

- 3. LEGAL/BOND COUNSEL:** Provide the name, address, telephone and fax numbers and e-mail address of the attorney or law firm representing the issuer.

LEGAL/BOND COUNSEL NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: ZIP CODE:

E-MAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

- 4. DESCRIPTION OF PROJECT:** Provide a brief description of the project including any economic or environmental impact. State any other impact the project being financed will make. This could include attraction of new businesses, urban renewal, services provided, special taxes paid, etc. Please indicate if the project involves new construction, expansion, acquisition and/or renovation. Also indicate what the project's primary function will be (i.e. manufacturing, solid waste treatment, etc.). Additional sheets may be attached if necessary.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

- 5. EMPLOYMENT INFORMATION:** Provide the number of full-time jobs to be retained at the project location and an estimate of new permanent full-time jobs to be created by the end of two full years in operation. If applicable, indicate the number of full time jobs which would be lost if the project does not receive private activity bond cap.

Full-Time Employee = Minimum 30 hours per week  
 Part-Time Employee = Minimum 15 hours per week

	Full-Time	Part-Time	*Full-Time Equivalent of Part-Time
Current Number of jobs at project location			
New jobs to be created			
Number of jobs retained that would otherwise be lost if the project does not receive private activity bond cap.			

*\*If part time employment is being created, please also indicate full time equivalents and an explanation of the formula used to determine full time equivalents. Without this information, part time jobs will not be used in the calculation of jobs.*

**6. AVERAGE HOURLY WAGE/BENEFITS:** Provide the average hourly wage per new employee and if applicable, the average hourly wage per employee that would otherwise be lost if the project does not receive private activity bond cap.

Average hourly wage per new employee.

Fringe benefits (Itemize benefits).

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Total (Average Hourly Wage + Fringe Benefits)

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Average hourly wage per retained employee that would otherwise be lost if the project does not receive private activity bond cap.

Fringe benefits (Itemize benefits).

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**Total** (Average Hourly Wage & Fringe Benefits)

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**7. OTHER STATE INCENTIVES:** Identify any state economic development incentives awarded to the company within the last 10 years including any state incentives that have been approved or have received preliminary approval for the proposed project detailed herein. Identify incentives awarded, amount awarded, year awarded, the applicable project and the site of the project. (Additional sheets may be attached if required).

	<u>Amount Awarded</u>	<u>Year Awarded</u>	<u>Project</u>	<u>Site</u>
(1) KEDFA	_____	_____	_____	_____
(2) KREDA	_____	_____	_____	_____
(3) KJDA	_____	_____	_____	_____
(4) KIA	_____	_____	_____	_____
(5) KIDA	_____	_____	_____	_____
(6) KIRA	_____	_____	_____	_____
(7) KEOZ	_____	_____	_____	_____
(8) KEIA	_____	_____	_____	_____
(9) KESA	_____	_____	_____	_____
(10) KIFA	_____	_____	_____	_____
(11) EDB	_____	_____	_____	_____
(12) OTHER	_____	_____	_____	_____

(1) Kentucky Economic Development Finance Authority; (2) Kentucky Rural Economic Development Act; (3) Kentucky Jobs Development Act; (4) Kentucky Infrastructure Authority; (5) Kentucky Industrial Development Authority; (6) Kentucky Industrial Revitalization Act; (7) Kentucky Economic Opportunity Zone; (8) Kentucky Enterprise Initiative Act; (9) Kentucky Environmental Stewardship Act; (10) Kentucky Investment Fund Act; (11) Economic Development Bond Program.

8. Provide the amount of private activity bond cap the company has previously been allocated in the past 10 years. Include the project, the location and the year of allocation.
9. **ALLOCATION REQUESTED:** State the amount of private activity bond volume cap being requested. Make every effort to assure that the amount requested will be the amount issued. 200 KAR 15:010 requires that the face amount of the bonds issued cannot be less than 85 percent of the confirmation amount.

ALLOCATION REQUESTED \_\_\_\_\_

10. **ANTICIPATED DELIVERY DATE:** Provide the date on which the bonds will be delivered and paid for.

ANTICIPATED DELIVERY DATE \_\_\_\_\_

11. **METHOD OF FINANCE:** Indicate whether the financing will be a private placement or reoffered through an underwriter to the public.

METHOD OF FINANCE \_\_\_\_\_  
(Private or Public Sale)

12. **CAPITAL INVESTMENT:** List the amount of Capital Investment that will be made in the proposed project:

Land Acquisition	\$ _____
Building (new construction/additions)	\$ _____
Improvements (existing buildings)	\$ _____
Equipment	\$ _____
Infrastructure	\$ _____
Other (Describe)	\$ _____
Total Capital Investment	\$ _____

**13.BORROWER/USER AND BOND COUNSEL CERTIFICATION:** The Borrower/User (beneficiary) must sign attesting to the accuracy of the information contained in the Notice of Intent. Bond Counsel must certify that the issue meets the requirements of Section 146 of the United States Internal Revenue Code of 1986, as amended.

### **CERTIFICATION OF APPLICATION**

Note: The information presented in this application and in the required attachments is evaluated by the KPABAC and its staff and is used in the determination of whether the project will receive an allocation of the local issuer pool of the state ceiling. Any material changes in the status of the proposed project from the facts presented herein could disqualify the project. Please contact staff of the Committee before taking any action which would change the status of the project as reported herein. Projects will be evaluated pursuant to the following criteria:

Jobs created = 30%

Average hourly wage and benefits = 25%

Capital investment = 10%

County unemployment rate = 25%

State incentives = 10% (receipt of state economic development incentives impacts the project negatively in the evaluation.)

Previous private activity bond cap allocated to the company = 25% deduction of total score per allocation received by the company up to 4 allocations.

Certification: I hereby represent and certify that the foregoing information, to the best of my knowledge, is true, complete and accurately and fairly describes the proposed project for which private activity bond cap is sought.

The undersigned, on behalf of the applicant, acknowledges that even though the information contained in this application, or which may hereafter be communicated to the Kentucky Private Activity Bond Allocation Committee contains confidential and proprietary information, it may be subject to public disclosure to the extent required by law pursuant to the Kentucky Open Records Act, Chapter 61 of the Kentucky Revised Statutes. Notwithstanding the above, except as otherwise agreed to by the applicant in writing, no confidential or proprietary information shall be disclosed if properly excluded from disclosure under KRS 61.878 (determined by the Committee, the Kentucky Attorney General, or Court of Competent Jurisdiction).

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Signature

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Title

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Date

## **Certification by Bond Counsel**

The undersigned certifies that the above issue meets the requirements of Section 146 (relating to the cap on Private Activity Bonds) of the United States Internal Revenue Code of 1986, as amended.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**14.APPLICATION ATTACHMENTS:** Indicate by checking the appropriate spaces the items that are attached to the Notice of Intent. The Inducement Resolution and the financial feasibility letter must be attached. The financial feasibility letter should be in the form of a commitment letter from a bank or recognized underwriter agreeing to purchase the bonds.

APPLICATION ATTACHMENTS:

\_\_\_\_\_ Inducement Resolution (required)  
\_\_\_\_\_ Financial Commitment Letter (required)  
\_\_\_\_\_ Other

**15.SEND CONFIRMATION TO:** Indicate to whom a copy of the confirmation should be sent.

\_\_\_\_\_ Bond Counsel  
\_\_\_\_\_ Issuer  
\_\_\_\_\_ Borrower

***The Kentucky Private Activity Bond Allocation Committee may also request additional information from the company to use in the evaluation of the project.***